

REFERENCE COPY

STATE OF CALIFORNIA  
OFFICE OF THE COMMANDING GENERAL  
STATE MILITARY FORCES - MILITARY DEPARTMENT  
2829 Watt Avenue - P.O. Box 214405  
Sacramento, California 95821

Change  
No. 1

11 May 1979

Medical Service  
MEDICAL CARE

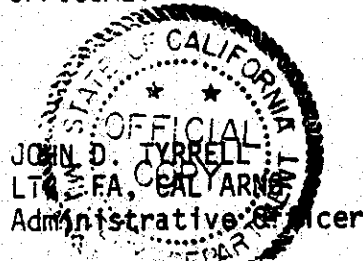
CAL ARNG Supplement 1 to NGR 40-3, 15 January 1979, is changed as follows:

1. In Table of Contents, as reads "Appendix B Letter of Notification (CAL ARNG Form 4-4)" is changed to read "Appendix B Letter of Notification (CAL ARNG Form 40-4)".
2. In paragraph 8c(1)(a)1, PROCEDURE FOR OBTAINING MEDICAL CARE, as reads "CAL ARNG Form 4-5" is changed to read "CAL ARNG Form 40-5".
3. In paragraph 11c(4), PAYMENT FOR MEDICAL CARE, line 1, as reads "(CAL ARNG Form 40-6-1)" is changed to read "(CAL ARNG Form 40-6-1)" and line 9, as reads "Item 5" is changed to read "Item 4".
4. As reads "Add Appendices B, C, and D" is changed to read "Add Appendices B, C and D".
5. File this change in front of the publication for reference purposes.

(CAPA-AC)

BY ORDER OF THE GOVERNOR:

OFFICIAL:



DISTRIBUTION:  
A

FRANK J. SCHOBBER, JR.  
Major General  
Commanding

REFERENCE COPY

STATE OF CALIFORNIA  
OFFICE OF THE COMMANDING GENERAL  
STATE MILITARY FORCES - MILITARY DEPARTMENT  
2829 Watt Avenue - P.O. Box 214405  
Sacramento, California 95821

CAL ARNG Supplement 1  
to NGR 40-3

15 January 1979

Medical Service  
MEDICAL CARE

Issue of further supplements to this regulation by subordinate commanders is prohibited, unless specifically approved by OCG SMF.

NGR 40-3, 15 December 1978, is supplemented as follows:

Page 1, TABLE OF CONTENTS. Add the following:

- Appendix B Letter of Notification (CAL ARNG Form ~~A-4~~ 40-4)  
Appendix C Meds Plan Quick Sheet (CAL ARNG Form 40-5)  
Appendix D Travel Orders and Authorization for Treatment  
(CAL ARNG Form 40-6-1)

Page 4, paragraph 8b(2), PROCEDURE FOR OBTAINING MEDICAL CARE. Add the following:

Notification may be made on CAL ARNG Form 40-4. (Appendix B)

Page 4, paragraph 8c(1)(a)1, PROCEDURE FOR OBTAINING MEDICAL CARE. Add the following:

Commanders and medical officers will maintain a list of medical facilities immediately available to each training site where they have responsibility to refer patients. CAL ARNG Form ~~A-5~~ 40-5 may be used for this purpose. (Appendix C)

Page 4, paragraph 8c(1)(a)2, PROCEDURE FOR OBTAINING MEDICAL CARE. Add the following:

CAL ARNG Form 40-6-1 will be used for this purpose. (Appendix D)

Page 4, paragraph 8c(2), PROCEDURE FOR OBTAINING MEDICAL CARE. Add the following:

CAL ARNG Form 40-4 may be used for notification. (Appendix B)

~~\*This supplement supersedes CAL ARNG Suppl 1, 25 Apr 77.~~

- 2 26 Oct 78 -

wrong per head & hand  
upson + me  
But not really because  
that suppl would already be  
out because of new NGR  
(1/15/79)

REFERENCE COM.

15 January 1979

Page 7, paragraph 11c, PAYMENT FOR MEDICAL CARE. CAL ARNG Provisional Form 2173 will be used in lieu of DA Form 2173 cited in para 11c(2). Add subparagraph (4) after subparagraph (3).

(4) Travel Orders and Authorization for Treatment (CAO ARNG Form 40-6-1) will be prepared each time a member is referred to a civilian medical facility for treatment. This letter order is issued by battalion level headquarters and higher. See reverse of form for instructions. A CAL ARNG Provisional Form 2173 will be furnished the medical facility upon first visit. The CAL ARNG Provisional Form 2173 must be complete except for Section I and must be signed by the unit commander or an officer acting for him. The component of the member being referred for treatment will be entered in Item 6 of the CAL ARNG Provisional Form 2173 (i.e., CAL ARNG, USAR, Army).

Appendix I, NOTIFICATION OF INJURY. Add the following:

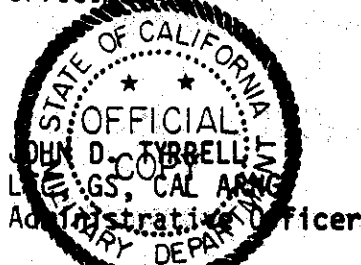
NOTE: CAL ARNG Form 40-4 incorporates the information required by this format.

Add Appendices B, C and D.

(CAPA-AC)

BY ORDER OF THE GOVERNOR:

OFFICIAL:



FRANK J. SCHOBEL, JR.  
Major General  
Commanding

DISTRIBUTION:

A

## APPENDIX B

LETTER OF NOTIFICATION (See para 8b(2), 8c(2), 8f & App I, NGR 40-3 for use)		(date) 15 Sep 77	(Letterhead) Co B, 2d Bn, 150th EA 2619 Rodiger Lane Timbucktoo, CA 94237
SUBJECT: Medical Care and/or Hospitalization Beyond the End of Training			
THRU: Channels	TO: Chief, NGB, ATTN: NGB-ARS		
1. Personal Data: (Name, SSN, Rank, Unit, Home Station) In accordance with para 8, NGR 40-3, Notification of Medical Care is furnished for the following individual: Fog, Frank O., 226-54-5857, SPL4, Co B 2d Bn 150th FA			
2. Facts Surrounding Onset of Disease or Injury: Type Training: (x) IDT ( ) AT ( ) FTTO Inclusive dates of training: 9-10 Jan 77 Place of injury or onset of disease: Timbucktoo, California Date incurred: 9 Jan 77 Diagnosis: Dram Fx of left tibia LD Status: ( ) No ( ) Yes, Date and Office of Final Determination: (x) Pending final determination			
3. Summary of Events Leading Up to and Surrounding Injury or Disease: Member fell from back of moving truck			
4. Current Status: (Includes Current Physical Exam or Clinical Report) Member was given emergency treatment and transferred to Army Medical Facility for follow up care.			
5. Name and Distance of Nearest Federal Medical Facility: Orug Army Medical Facility, 15 miles			
6. Facility Utilized and Reason for Use: (Name and Address) Timbucktoo General Hospital, 3344 N. Andrew Street, Timbucktoo, CA 94237 Member was in need of emergency treatment for suspected head injuries.			
7. Estimate of Cost and Duration of Treatment: \$ 755.00 Three hours only.			
8. Authentication:			
a. (Signature and Signature Block of the Commander's Representative) FOR THE COMMANDER:		b. (Signature and Signature Block of Commander)  GORDON H. WEBB 1LT, FA, CAL ARNG Commanding	
DISPOSITION: 1 copy to file & 2 copies to OCG - SNF			

CAL ARNG FORM 40-4

## APPENDIX C

## Meds Plan Quick Sheet (CAL ARNG Form 40-5)

MEDICAL SERVICE PLAN QUICK SOURCES OF HOSPITAL AND EMERGENCY EVACUATION FOR TREATMENT*	
(Short Title: MEDS PLAN QUICK SHEET)	
(Effective dates for use)	(Site)**
17 Jun - 1 Jul 78	Camp George, California
(Unit and organization)	
Co B 2d Bn 150th FA	

TREATMENT		
FACILITY	ADDRESS	TELEPHONE
Dispensary: Post Dispensary	14th E. M St	X 7231
Nearest Service Hospital: Grays Army Medical Facility	4490 G Street Twin Falls, ID, CA	(714) 263-4921 AV 982-4921
Assigned Military Physician: CPT ROLK	CLDG 1195 Room 5 14th & M St	X 7240
Nearest Civilian Hospital: George City Medical Center	5432 X St George City	(714) 369-2141
Nearest Civilian Physician: Dr Gordon Quicknife	823 10th St George City	(714) 362-9401 or 362-4972

EVACUATION		
Air Evac: Patersons Pod	10th E. M St	X 7260
Military Ambulance: Firehouse #1	16th & M St	X 7201
Civilian Ambulance: George City Emergency	1940 E. B St George City	(714) 369-3790

\* This sheet does not serve as a medical service plan but may be used as an annex or tab to one.

\*\* Prepare one sheet for each training site.

NOTE: See instructions on the reverse of this form.

## APPENDIX C (Continued)

## Reverse Side of CAL ARNG Form 40-5

## CHOOSING THE PROPER MEDICAL FACILITY FOR TREATMENT

A. Treatment in the nearest facility. Cases of serious injury or disease requiring life saving emergency treatment not available at the place of training should be immediately taken to the medical facility having the needed equipment and personnel which can be reached in the shortest time.

B. Treatment under normal conditions. Injuries and diseases stemming from State Active Duty are treated at civilian facilities at the expense of the State provided they were not caused by the member's own misconduct or disobedience of lawful orders. Illnesses incident to drill are also treated at State expense when they are a direct result of the training situation. The following are properly treated in a service hospital or at a civilian facility at Army expense in emergencies or by special permission of NGB or OCG-SMF:

- (1) Injuries received in line of duty during drill.
- (2) Injuries and diseases caused by (in line of duty) annual training or full time training duty or travel directly to or from either.
- (3) Diseases and injuries not suffered in line of duty which occur and need treatment during the period of training. No treatment will be provided in these cases after the training period ends.

Injuries which happen while a member is going directly to or from drill are properly treated at a Veterans Administration facility unless they are caused by the individual's negligence or misconduct or are outside reasonable travel times.

## PROVIDING PROPER IDENTIFICATION FOR TREATMENT

Travel Orders and Authorization for Treatment (CAL ARNG Form 40-6-1) will be used each time a member is referred for treatment away from the training base or installation. These orders must be prepared and authenticated by the battalion or squadron headquarters. They will be used for treatment in service hospitals as well as civilian medical facilities.

## FOR ADDITIONAL INSTRUCTIONS

See the following publications for further information concerning line of duty injuries and diseases and the benefits needed for members:

- (1) NGR 37-104-2 and OCG supplement - Disability Pay
- (2) NGR 40-3 and OCG supplement - Medical Care
- (3) NGR 600-3 and OCG supplement - Line of Duty Determinations
- (4) CAL ARNGR 600-7 - State Compensation

## APPENDIX D

HEADQUARTERS, SECOND BATTALION 150TH FIELD ARTILLERY  
 CALIFORNIA ARMY NATIONAL GUARD  
 2619 Rodiger Lane  
 Timbucktoo, CA 94237  
 (Detachment or Squadron Letterhead)

15 September 1977  
(date)

SUBJECT: Travel Orders and Authorization for Treatment

TO: Medical Treatment Facility, ATTN: Patient Administration  
 Commander, State Military Forces, California National Guard, ATTN: Casualty Officer  
 United States Property and Fiscal Officer for California, ATTN: CHUS - RF  
 Transportation Officer  
 Individual Concerned

1. The following member of the California Army National Guard is authorized medical care under the provisions of para 4, NGR 40-3, and para 4-2, AR 40-3, and is ordered to report for treatment as indicated:  
**Fog, Frank O. 226-54-6857 Co B 2d Bn 150th FA, Timbucktoo, CA 94237**  
 (Last Name, First Name, MI SSN Rank Unit Unit Address & ZIP Code)

Attached to: **Grug Army Medical Facility, Timbucktoo, CA 94237**  
 (Name, Address and ZIP Code of Medical Facility)

Effective dates hospitalized: **15 September 1977**

Reporting date: **15 September 1977**

Purpose: **Treatment**

(Treatment, Evaluation, Medical Surgery, Medical Board Proceedings, Physical Evaluation Board, etc.)

Additional instructions: Report to Patient Administration for transportation as **NA** (Unit of POB)  
 at **NA** (Patient should arrive at least **NA** days in advance for processing).  
 If desired, Transportation Officer will furnish transportation request and rail tickets. Forwarding copy of transportation request and rail tickets will be provided to United States Property and Fiscal Officer for California, Camp San Luis Obispo, P. O. Box 6, San Luis Obispo, CA 93406. Travel of dependents is not authorized. Reimbursement for actual expenses is authorized. Mileage of secondary addresses are not authorized.

FOR ARNG/ARNG USE

NOTE: (C) 32 USC 318; 37 USC 304(h) (For all injuries incurred in line of duty for in line of duty disease, incurred while on duty under orders are considered 30 days or less.)

(C) 32 USC 319 (For in line of duty disease incurred while on duty under orders are considered 30 days or less.)

ACCOUNTING CLASSIFICATION: FY 76: P1, P2, P3, P4, P5, P6, P7, P8, P9, P10, P11, P12, P13, P14, P15, P16, P17, P18, P19, P20, P21, P22, P23, P24, P25, P26, P27, P28, P29, P30, P31, P32, P33, P34, P35, P36, P37, P38, P39, P40, P41, P42, P43, P44, P45, P46, P47, P48, P49, P50, P51, P52, P53, P54, P55, P56, P57, P58, P59, P60, P61, P62, P63, P64, P65, P66, P67, P68, P69, P70, P71, P72, P73, P74, P75, P76, P77, P78, P79, P80, P81, P82, P83, P84, P85, P86, P87, P88, P89, P90, P91, P92, P93, P94, P95, P96, P97, P98, P99, P100, P101, P102, P103, P104, P105, P106, P107, P108, P109, P110, P111, P112, P113, P114, P115, P116, P117, P118, P119, P120, P121, P122, P123, P124, P125, P126, P127, P128, P129, P130, P131, P132, P133, P134, P135, P136, P137, P138, P139, P140, P141, P142, P143, P144, P145, P146, P147, P148, P149, P150, P151, P152, P153, P154, P155, P156, P157, P158, P159, P160, P161, P162, P163, P164, P165, P166, P167, P168, P169, P170, P171, P172, P173, P174, P175, P176, P177, P178, P179, P180, P181, P182, P183, P184, P185, P186, P187, P188, P189, P190, P191, P192, P193, P194, P195, P196, P197, P198, P199, P200, P201, P202, P203, P204, P205, P206, P207, P208, P209, P210, P211, P212, P213, P214, P215, P216, P217, P218, P219, P220, P221, P222, P223, P224, P225, P226, P227, P228, P229, P230, P231, P232, P233, P234, P235, P236, P237, P238, P239, P240, P241, P242, P243, P244, P245, P246, P247, P248, P249, P250, P251, P252, P253, P254, P255, P256, P257, P258, P259, P260, P261, P262, P263, P264, P265, P266, P267, P268, P269, P270, P271, P272, P273, P274, P275, P276, P277, P278, P279, P280, P281, P282, P283, P284, P285, P286, P287, P288, P289, P290, P291, P292, P293, P294, P295, P296, P297, P298, P299, P300, P301, P302, P303, P304, P305, P306, P307, P308, P309, P310, P311, P312, P313, P314, P315, P316, P317, P318, P319, P320, P321, P322, P323, P324, P325, P326, P327, P328, P329, P330, P331, P332, P333, P334, P335, P336, P337, P338, P339, P340, P341, P342, P343, P344, P345, P346, P347, P348, P349, P350, P351, P352, P353, P354, P355, P356, P357, P358, P359, P360, P361, P362, P363, P364, P365, P366, P367, P368, P369, P370, P371, P372, P373, P374, P375, P376, P377, P378, P379, P380, P381, P382, P383, P384, P385, P386, P387, P388, P389, P390, P391, P392, P393, P394, P395, P396, P397, P398, P399, P400, P401, P402, P403, P404, P405, P406, P407, P408, P409, P410, P411, P412, P413, P414, P415, P416, P417, P418, P419, P420, P421, P422, P423, P424, P425, P426, P427, P428, P429, P430, P431, P432, P433, P434, P435, P436, P437, P438, P439, P440, P441, P442, P443, P444, P445, P446, P447, P448, P449, P450, P451, P452, P453, P454, P455, P456, P457, P458, P459, P460, P461, P462, P463, P464, P465, P466, P467, P468, P469, P470, P471, P472, P473, P474, P475, P476, P477, P478, P479, P480, P481, P482, P483, P484, P485, P486, P487, P488, P489, P490, P491, P492, P493, P494, P495, P496, P497, P498, P499, P500, P501, P502, P503, P504, P505, P506, P507, P508, P509, P510, P511, P512, P513, P514, P515, P516, P517, P518, P519, P520, P521, P522, P523, P524, P525, P526, P527, P528, P529, P530, P531, P532, P533, P534, P535, P536, P537, P538, P539, P540, P541, P542, P543, P544, P545, P546, P547, P548, P549, P550, P551, P552, P553, P554, P555, P556, P557, P558, P559, P560, P561, P562, P563, P564, P565, P566, P567, P568, P569, P570, P571, P572, P573, P574, P575, P576, P577, P578, P579, P580, P581, P582, P583, P584, P585, P586, P587, P588, P589, P590, P591, P592, P593, P594, P595, P596, P597, P598, P599, P600, P601, P602, P603, P604, P605, P606, P607, P608, P609, P610, P611, P612, P613, P614, P615, P616, P617, P618, P619, P620, P621, P622, P623, P624, P625, P626, P627, P628, P629, P630, P631, P632, P633, P634, P635, P636, P637, P638, P639, P640, P641, P642, P643, P644, P645, P646, P647, P648, P649, P650, P651, P652, P653, P654, P655, P656, P657, P658, P659, P660, P661, P662, P663, P664, P665, P666, P667, P668, P669, P670, P671, P672, P673, P674, P675, P676, P677, P678, P679, P680, P681, P682, P683, P684, P685, P686, P687, P688, P689, P690, P691, P692, P693, P694, P695, P696, P697, P698, P699, P700, P701, P702, P703, P704, P705, P706, P707, P708, P709, P710, P711, P712, P713, P714, P715, P716, P717, P718, P719, P720, P721, P722, P723, P724, P725, P726, P727, P728, P729, P730, P731, P732, P733, P734, P735, P736, P737, P738, P739, P740, P741, P742, P743, P744, P745, P746, P747, P748, P749, P750, P751, P752, P753, P754, P755, P756, P757, P758, P759, P760, P761, P762, P763, P764, P765, P766, P767, P768, P769, P770, P771, P772, P773, P774, P775, P776, P777, P778, P779, P780, P781, P782, P783, P784, P785, P786, P787, P788, P789, P790, P791, P792, P793, P794, P795, P796, P797, P798, P799, P800, P801, P802, P803, P804, P805, P806, P807, P808, P809, P810, P811, P812, P813, P814, P815, P816, P817, P818, P819, P820, P821, P822, P823, P824, P825, P826, P827, P828, P829, P830, P831, P832, P833, P834, P835, P836, P837, P838, P839, P840, P841, P842, P843, P844, P845, P846, P847, P848, P849, P850, P851, P852, P853, P854, P855, P856, P857, P858, P859, P860, P861, P862, P863, P864, P865, P866, P867, P868, P869, P870, P871, P872, P873, P874, P875, P876, P877, P878, P879, P880, P881, P882, P883, P884, P885, P886, P887, P888, P889, P890, P891, P892, P893, P894, P895, P896, P897, P898, P899, P900, P901, P902, P903, P904, P905, P906, P907, P908, P909, P910, P911, P912, P913, P914, P915, P916, P917, P918, P919, P920, P921, P922, P923, P924, P925, P926, P927, P928, P929, P930, P931, P932, P933, P934, P935, P936, P937, P938, P939, P940, P941, P942, P943, P944, P945, P946, P947, P948, P949, P950, P951, P952, P953, P954, P955, P956, P957, P958, P959, P960, P961, P962, P963, P964, P965, P966, P967, P968, P969, P970, P971, P972, P973, P974, P975, P976, P977, P978, P979, P980, P981, P982, P983, P984, P985, P986, P987, P988, P989, P990, P991, P992, P993, P994, P995, P996, P997, P998, P999, P1000, P1001, P1002, P1003, P1004, P1005, P1006, P1007, P1008, P1009, P1010, P1011, P1012, P1013, P1014, P1015, P1016, P1017, P1018, P1019, P1020, P1021, P1022, P1023, P1024, P1025, P1026, P1027, P1028, P1029, P1030, P1031, P1032, P1033, P1034, P1035, P1036, P1037, P1038, P1039, P1040, P1041, P1042, P1043, P1044, P1045, P1046, P1047, P1048, P1049, P1050, P1051, P1052, P1053, P1054, P1055, P1056, P1057, P1058, P1059, P1060, P1061, P1062, P1063, P1064, P1065, P1066, P1067, P1068, P1069, P1070, P1071, P1072, P1073, P1074, P1075, P1076, P1077, P1078, P1079, P1080, P1081, P1082, P1083, P1084, P1085, P1086, P1087, P1088, P1089, P1090, P1091, P1092, P1093, P1094, P1095, P1096, P1097, P1098, P1099, P1100, P1101, P1102, P1103, P1104, P1105, P1106, P1107, P1108, P1109, P1110, P1111, P1112, P1113, P1114, P1115, P1116, P1117, P1118, P1119, P1120, P1121, P1122, P1123, P1124, P1125, P1126, P1127, P1128, P1129, P1130, P1131, P1132, P1133, P1134, P1135, P1136, P1137, P1138, P1139, P1140, P1141, P1142, P1143, P1144, P1145, P1146, P1147, P1148, P1149, P1150, P1151, P1152, P1153, P1154, P1155, P1156, P1157, P1158, P1159, P1160, P1161, P1162, P1163, P1164, P1165, P1166, P1167, P1168, P1169, P1170, P1171, P1172, P1173, P1174, P1175, P1176, P1177, P1178, P1179, P1180, P1181, P1182, P1183, P1184, P1185, P1186, P1187, P1188, P1189, P1190, P1191, P1192, P1193, P1194, P1195, P1196, P1197, P1198, P1199, P1200, P1201, P1202, P1203, P1204, P1205, P1206, P1207, P1208, P1209, P1210, P1211, P1212, P1213, P1214, P1215, P1216, P1217, P1218, P1219, P1220, P1221, P1222, P1223, P1224, P1225, P1226, P1227, P1228, P1229, P1230, P1231, P1232, P1233, P1234, P1235, P1236, P1237, P1238, P1239, P1240, P1241, P1242, P1243, P1244, P1245, P1246, P1247, P1248, P1249, P1250, P1251, P1252, P1253, P1254, P1255, P1256, P1257, P1258, P1259, P1260, P1261, P1262, P1263, P1264, P1265, P1266, P1267, P1268, P1269, P1270, P1271, P1272, P1273, P1274, P1275, P1276, P1277, P1278, P1279, P1280, P1281, P1282, P1283, P1284, P1285, P1286, P1287, P1288, P1289, P1290, P1291, P1292, P1293, P1294, P1295, P1296, P1297, P1298, P1299, P1300, P1301, P1302, P1303, P1304, P1305, P1306, P1307, P1308, P1309, P1310, P1311, P1312, P1313, P1314, P1315, P1316, P1317, P1318, P1319, P1320, P1321, P1322, P1323, P1324, P1325, P1326, P1327, P1328, P1329, P1330, P1331, P1332, P1333, P1334, P1335, P1336, P1337, P1338, P1339, P1340, P1341, P1342, P1343, P1344, P1345, P1346, P1347, P1348, P1349, P1350, P1351, P1352, P1353, P1354, P1355, P1356, P1357, P1358, P1359, P1360, P1361, P1362, P1363, P1364, P1365, P1366, P1367, P1368, P1369, P1370, P1371, P1372, P1373, P1374, P1375, P1376, P1377, P1378, P1379, P1380, P1381, P1382, P1383, P1384, P1385, P1386, P1387, P1388, P1389, P1390, P1391, P1392, P1393, P1394, P1395, P1396, P1397, P1398, P1399, P1400, P1401, P1402, P1403, P1404, P1405, P1406, P1407, P1408, P1409, P1410, P1411, P1412, P1413, P1414, P1415, P1416, P1417, P1418, P1419, P1420, P1421, P1422, P1423, P1424, P1425, P1426, P1427, P1428, P1429, P1430, P1431, P1432, P1433, P1434, P1435, P1436, P1437, P1438, P1439, P1440, P1441, P1442, P1443, P1444, P1445, P1446, P1447, P1448, P1449, P1450, P1451, P1452, P1453, P1454, P1455, P1456, P1457, P1458, P1459, P1460, P1461, P1462, P1463, P1464, P1465, P1466, P1467, P1468, P1469, P1470, P1471, P1472, P1473, P1474, P1475, P1476, P1477, P1478, P1479, P1480, P1481, P1482, P1483, P1484, P1485, P1486, P1487, P1488, P1489, P1490, P1491, P1492, P1493, P1494, P1495, P1496, P1497, P1498, P1499, P1500, P1501, P1502, P1503, P1504, P1505, P1506, P1507, P1508, P1509, P1510, P1511, P1512, P1513, P1514, P1515, P1516, P1517, P1518, P1519, P1520, P1521, P1522, P1523, P1524, P1525, P1526, P1527, P1528, P1529, P1530, P1531, P1532, P1533, P1534, P1535, P1536, P1537, P1538, P1539, P1540, P1541, P1542, P1543, P1544, P1545, P1546, P1547, P1548, P1549, P1550, P1551, P1552, P1553, P1554, P1555, P1556, P1557, P1558, P1559, P1560, P1561, P1562, P1563, P1564, P1565, P1566, P1567, P1568, P1569, P1570, P1571, P1572, P1573, P1574, P1575, P1576, P1577, P1578, P1579, P1580, P1581, P1582, P1583, P1584, P1585, P1586, P1587, P1588, P1589, P1590, P1591, P1592, P1593, P1594, P1595, P1596, P1597, P1598, P1599, P1600, P1601, P1602, P1603, P1604, P1605, P1606, P1607, P1608, P1609, P1610, P1611, P1612, P1613, P1614, P1615, P1616, P1617, P1618, P1619, P1620, P1621, P1622, P1623, P1624, P1625, P1626, P1627, P1628, P1629, P1630, P1631, P1632, P1633, P1634, P1635, P1636, P1637, P1638, P1639, P1640, P1641, P1642, P1643, P1644, P1645, P1646, P1647, P1648, P1649, P1650, P1651, P1652, P1653, P1654, P1655, P1656, P1657, P1658, P1659, P1660, P1661, P1662, P1663, P1664, P1665, P1666, P1667, P1668, P1669, P1670, P1671, P1672, P1673, P1674, P1675, P1676, P1677, P1678, P1679, P1680, P1681, P1682, P1683, P1684, P1685, P1686, P1687, P1688, P1689, P1690, P1691, P1692, P1693, P1694, P1695, P1696, P1697, P1698, P1699, P1700, P1701, P1702, P1703, P1704, P1705, P1706, P1707, P1708, P1709, P1710, P1711, P1712, P1713, P1714, P1715, P1716, P1717, P1718, P1719, P1720, P1721, P1722, P1723, P1724, P1725, P1726, P1727, P1728, P1729, P1730, P1731, P1732, P1733, P1734, P1735, P1736, P1737, P1738, P1739, P1740, P1741, P1742, P1743, P1744, P1745, P1746, P1747, P1748, P1749, P1750, P1751, P1752, P1753, P1754, P1755, P1756, P1757, P1758, P1759, P1760, P1761, P1762, P1763, P1764, P1765, P1766, P1767, P1768, P1769, P1770, P1771, P1772, P1773, P1774, P1775, P1776, P1777, P1778, P1779, P1780, P1781, P1782, P1783, P1784, P1785, P1786, P1787, P1788, P1789, P1790, P1791, P1792, P1793, P1794, P1795, P1796, P1797, P1798, P1799, P1800, P1801, P1802, P1803, P1804, P1805, P1806, P1807, P1808, P1809, P1810, P1811, P1812, P1813, P1814, P1815, P1816, P1817, P1818, P1819, P1820, P1821, P1822, P1823, P1824, P1825, P1826, P1827, P1828, P1829, P1830, P1831, P1832, P1833, P1834, P1835, P1836, P1837, P1838, P1839, P1840, P1841, P1842, P1843, P1844, P1845, P1846, P1847, P1848, P1849, P1850, P1851, P1852, P1853, P1854, P1855, P1856, P1857, P1858, P1859, P1860, P1861, P1862, P1863, P1864, P1865, P1866, P1867, P1868, P1869, P1870, P1871, P1872, P1873, P1874, P1875, P1876, P1877, P1878, P1879, P1880, P1881, P1882, P1883, P1884, P1885, P1886, P1887, P1888, P1889, P1890, P1891, P1892, P1893, P1894, P1895, P1896, P1897, P1898, P1899, P1900, P1901, P1902, P1903, P1904, P1905, P1906, P1907, P1908, P1909, P1910, P1911, P1912, P1913, P1914, P1915, P1916, P1917, P1918, P1919, P1920, P1921, P1922, P1923, P1924, P1925, P1926, P1927, P1928, P1929, P1930, P1931, P1932, P1933, P1934, P1935, P1936, P1937, P1938, P1939, P1940, P1941, P1942, P1943, P1944, P1945, P1946, P1947, P1948, P1949, P1950, P1951, P1952, P1953, P1954, P1955, P1956, P1957, P1958, P1959, P1960, P1961, P1962, P1963, P1964, P1965, P1966, P1967, P1968, P1969, P1970, P1971, P1972, P1973, P1974, P1975, P1976, P1977, P1978, P1979, P1980, P1981, P1982, P1983, P1984, P1985, P1986, P1987, P1988, P1989, P1990, P1991, P1992, P1993, P1994, P1995, P1996, P1997, P1998, P1999, P2000, P2001, P2002, P2003, P2004, P2005, P2006, P2007, P2008, P2009, P2010, P2011, P2012, P2013, P2014, P2015, P2016, P2017, P2018, P2019, P2020, P2021, P2022, P2023, P2024, P2025, P2026, P2027, P2028, P2029, P2030, P2031, P2032, P2033, P2034, P203

## APPENDIX D (continued)

## Reverse Side of CAL ARNG Form 40-6-1

## INSTRUCTIONS FOR PREPARATION OF THE LETTER FORM ON THE OPPOSITE SIDE OF THIS FORM

1. The Travel Orders and Authorization for Treatment letter is only to be used for members who are believed to have incurred an injury or a disease in line of duty. It will be prepared each time the member is referred for treatment or evaluation. Prepare the letter in at least seven copies. Two copies will be furnished to the primary service or civilian treatment agency and one copy will be furnished to each of the other addressees. One copy will be retained for the member's personnel file. Additionally, information copies should be given to all civilian agencies who may submit bills for medical service (e.g., Radiologist, ambulance, etc.). When a member is referred in an emergency without this authorization, it will be furnished to all addressees within forty-eight hours.

2. Every blank will be filled in each time the letter is used. When the member is referred to a civilian physician or facility for outpatient care, "Not Applicable" will be entered in the blank after "Effective dates hospitalized". When treatment is obtained without an appointment, "Not Applicable" will also be used on blanks for appointment. Organizations are responsible for making appointments for members of their units. An "x" will be entered on the appropriate blank under authority.

3. A copy of DA Form 2173, complete except for Section I, will be attached to the copies of this letter for the primary treatment facility on the first referral only.

DISABILITY STATEMENT AND REPORT OF ATTENDING PHYSICIAN (THIS FORM IS AFFECTED BY THE PRIVACY ACT OF 1974)	
AUTHORITY: 32 USC 318 and 319; 37 USC 204(h); Sections 340 and 341, California Military and Veterans Code.	
PRINCIPAL PURPOSES: To verify member's disability caused by service connected injury or disease. To determine final diagnosis. Social Security Number (SSN) is used for identification.	
ROUTINE USES: Used within the California Army National Guard to determine eligibility for disability pay and treatment in a service hospital or at government expense. Used to determine final diagnosis in line of duty investigations and determinations. Used by State Compensation Insurance Fund as an agent of the State of California to verify entitlement to State Compensation when federal benefits are delayed.	
DISCLOSURE IS VOLUNTARY: Failure of member or his physician to provide requested information may result in delay in payment for incapacitation or delay in final disposition of member's case (see Gen decision #0-125404, 2Aug76).	
I have examined and found that <u>Frank O. Fox</u> (name)	
SP4 (grade)	<u>226-51-5857</u> (SSN)
Co P 2d Bn 150th Avn Co	
CALIFORNIA Army National Guard (is) <u>(checked)</u> disabled for performance of his or her normal military duties. **Disabled from <u>1 Sep 77</u> to <u>30 Sep 77</u> (date)	
Cause of disability: <u>Disinfectant</u> (final diagnosis)	
Type medical treatment furnished: <u>Out</u>	
Nature of the healing process: <u>Healed</u>	
Date expected to return to normal military duty: <u>31 Dec 77</u> (able to perform without limitation)	
Current medical profile: <u>1/13</u> (by service physician)	
<u>15 Sep 77</u> (date signed)	
<u>VICTOR C. ATE, M.D.</u> (physician's signature)	
*Strike out inapplicable term.	
**Complete for period of disability.	
(typed or printed name of physician and medical treatment facility)	

CAL ARNG Form 40-6-2 1 May 78 Replaces CAL NG Form 37-2B, 15 Apr 76



STATE OF CALIFORNIA  
OFFICE OF THE COMMANDING GENERAL  
STATE MILITARY FORCES - MILITARY DEPARTMENT  
2829 Watt Avenue - P.O. Box 214405  
Sacramento, California 95821

CAL ARNG Supplement 2  
to NGR 40-3

19 January 1981

Medical Service  
MEDICAL CARE FOR ARMY NATIONAL GUARD MEMBERS

Issue of further supplements to this regulation by subordinate commanders is prohibited, unless specifically approved by OCG SMF.

NGR 40-3, 15 December 1978, is supplemented as follows:

Page 6, paragraph 9, STATUS WHILE UNDERGOING HOSPITALIZATION. Add subparagraph e.

e. Individuals who are disabled by an injury or disease in the line of duty and disability is not resolved by a MEB/PEB or a return to normal military duty prior to their ETS will be afforded the opportunity to extend their ETS pending the resolution of the disability case. The unit/organization will inform the individual, in writing, a minimum of 60 days prior to ETS that if he/she refuses to extend his/her enlistment that medical treatment and/or incapacitation pay will terminate upon ETS date. Further medical treatment and/or compensation will require the individual to apply to the Veterans Administration. Subject individual will be required to respond in writing of his/her option prior to the ETS date. A sample letter is at Appendix E.

Add Appendix E.

(CAPA-AC)

BY ORDER OF THE GOVERNOR:

OFFICIAL  
STATE OF CALIFORNIA  
OFFICIAL  
RICHARD GARYSLEY  
MAJ. ARMOR, CAL ARNG  
Administrative Officer

FRANK J. SCHOBBER, JR.  
Major General  
Commanding

DISTRIBUTION:  
A

19 January 1981

CAL ARNG Suppl 2 to NGR 40-3

APPENDIX E

SAMPLE LETTER

UNIT/ORGANIZATION LETTER HEAD

S- (Suspense Date)

(Date of Letter)

SUBJECT: Continuation of Medical Treatment and/or Incapacitation Pay

(Addressed to Injured Individual's Home Address)

1. Your enlistment records indicate that your ETS will occur on \_\_\_\_\_.  
(ETS date)
2. Under the provisions of current regulations, incapacitation pay CANNOT continue beyond the date on which your enlistment expires. In addition, medical treatment may be obtained only at or by authority of a Veterans Administration hospital. Continuation of present medical treatment and/or incapacitation pay requires that you extend your enlistment. If you do not desire to extend your enlistment, you must apply to the Veterans Administration for continuation of medical treatment after your ETS date.
3. You must complete the following indorsement and return this letter to the unit/organization prior to (enter a date prior to ETS date).

FOR THE COMMANDER:

\_\_\_\_\_  
\_\_\_\_\_

19 January 1981

APPENDIX E (continued)

1st Ind

TO: (Unit/Organization with address)

\_\_\_\_\_ I desire to extend my enlistment

\_\_\_\_\_ I DO NOT desire to extend my enlistment and understand that after my ETS date incapacitation pay will terminate and any further medical treatment will require my application to the Veterans Administration.

\_\_\_\_\_  
(Date signed)

\_\_\_\_\_  
(Signature of SM)